

RECEIVED JAN 1 2 2015

State of South Dakota Campaign Finance Disclosure Statement

S.D. SEC. OF STATE

THE STATE OF THE	
Full Name of Committee: Christine Eric	ckson For House
Christine Erickson christ Committee Chair, Treasurer, Candidate E-Mail	tine, m. erickson & gmail.
5908 W37th ST Sioux F	Talls SD 57106
Committee Postal Address	
Christine Erickson 366	-5377 366-5377
	\wedge
SD House of Representatives If Candidate Committee, please note office being sought, and District # (If applicable)	Regublican Political party Affiliation (if any)
If Ballot Question Committee, Ballot Question number or letter.	Supporting? Opposing?
Type of Campaign Statement: Pre-Primary Pre-Convention Pre-General Mid-Year Year-	End Amendment Supplement Termination
VERIFICATION OF PERSON MAKING REPORT	County, municipal and school candidates
, Christine M. Erickson	file this statement with the person in charge of the local election.
(print name legibly), certify that I have examined this report and to the best of my knowledge and belief it is true, correct and complete. I also understand that failure to timely file any statement, amendment, or correction required subjects the treasurer respon-	Statewide PACs, political party, ballot question and other committees file this statement with the Secretary of State's Office.
sible for filing to a civil penalty per day for each day that the statement remains delinquent.	Secretary of State, Elections Department 500 East Capitol Ave., Ste 204 Pierre, SD 57501 or fax to 605-773-6580 or
1/16/15	e-mail to cash@state.sd.us
July M.S.	Fax and e-mail images must contain the signature(s) and the original must be filed in our office within one week following the date the fax/e-mail was received.
Signature of Treasurer	

INCOME

Direct Contributions from Individuals

Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space or you may attach additional sheets of paper.

Unitemized Contributions from Individuals	Amount
Enter total of all unitemized contributions (\$100 or less each from individuals) here:	\$ () ·
	 Line item A1

Itemized Contributions from Individuals Enter all itemized contributions (\$100 or more each from individuals) below: Name Residential (Street) Address **Amount** \$ \$ \$ \$ \$ \$ \$ S \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ Itemized Contributions - Enter total of all itemized contributions (\$100 or more each from individuals):

Direct Contributions from Organizations

An organization is defined as any corporate entity, partnership, association, club, labor union, or any group organized in a corporate form that is not defined as a political committee or political party. ONLY PAC's and Ballot Committee Questions may recieve direct contributions from organizations.

Name	Residential (Street) Address	Amoun
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		\$
	s - Enter total of all <i>itemized</i> contributions from organizations:	\$ •

Direct Contributions from Political Parties

Contributions from	Political Parties	
Name	Residential (Street) Address	Amount
		\$
		\$ •
		\$ •
		\$ •
		\$
Enter total of all contribution	ons from Political Parties here:	\$ \bigcirc 3 ·

Line item C1

Direct Contributions from In-State Political Action Committees

Name	Residential (Street) Address	Amount
		\$.
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		\$.
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		\$.
Enter total of all contributio	ns from South Dakota Political Action Committees or South Dakota Candidate Con	nmittees here: \$.

Direct Contributions from Out-of-State Political Action Committees

Contributions from Fed	ontributions from Federal Political Action Committees		
Name	Filing Web Address		Amount
		\$	•
		\$	*
		\$	•
		\$	•
		\$	
		\$	
		\$	
		\$	*
		\$	•
Enter total of all contributi	ions from Federal Political Action Committees or Out-of-State Candidate Committees here:	\$	<i>O</i> .

Line item D2

Direct Contributions from Candidate Committees

Contributions from Candidate Committees			
Name	Residential (Street) Address	Amou	
		\$.	
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		\$.	
		\$.	
		\$.	
		\$.	
		\$.	
		\$.	
Enter total of all contributio	ns from Candidate Committees here:	\$ ().	

In-Kind Contributions

Non-cash contributions of good	Non-cash contributions of good and services and the estimated fair market value			
Description	Name and residential address	Estimated value		
		\$		
		\$		
		\$		
		\$. •	
		\$		
		\$		
		\$	•	
		\$	•	
		\$		
		\$		
Enter total of all estimated in-kind co	ontributions here:	\$	/) ·	

Line item F1

Other Income

Source of Income	Description of Income		Amount
		\$	
		\$	
		\$	-
Enter total of other income here:		\$ /	~) .

Line item G1

Establishing and Administering Committee/Solicitation Costs

List a categorical description and the estimated value of funds or donations by any organization to its political committee for establishing and administering the political committee or solicitation costs of the political committee.

Organizational Name and Categorical Description for Direct Funds	Amount	
	\$ •	
	\$ •	
	\$ •	
Enter total here:	\$ ·	

Line item H1

EXPENDITURES

Operational Expenditures

Categories have been provided for reporting common expenses. You may list other expense items at your discretion

Campaign Expenses		Amount
Advertising	\$	•
Consulting	\$ ***************************************	
Interest	\$	4
Postage	\$	
Printing	\$	
Rent	\$	
Salaries	\$	
Telephone	\$	
Travel	\$ 460.	.36
Utilities	\$ 100	
List other expense items below:	\$	
Office Work	\$ 115	. 00
	\$	
	\$	4
	\$	
	\$	
	\$ 	
	\$	
	\$	
	\$	
	\$	
	\$ 	
	\$ 	
	\$ ***************************************	
	\$	
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	\$	
	\$ A CONTRACTOR OF THE PARTY OF TH	
	\$	*
	\$	
Enter total expenditures here:	\$ 581	5 .3%

Line item X1

Contributions Made to Candidates and Committees

Name of Candidate or Committee		Α	mount
Erickson For Sionx Falls	\$	5091	99.
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
	\$		
Enter total of contributions to candidates or committees here:	\$ [090	.99

Line item X2

Debts and Obligations Owed by Committee

Owed to/Creditor's Name	Nature of obligation	Address	Amount
			\$
			\$
			\$
			\$ *
Enter total debt owed by committee here:			\$

Line item X3

Loans Owed to Committee

Report the amount of each loan owed to the political committee or political party. The amount of each loan made during the reporting period and the balance of each loan owed to the committee at the end of the reporting period must be itemized.

Name of recipient of loan, including address.	ount of loan made ring the reporting period	1	of loan repaid the reporting period	Balance of loan at the end of the reporting period
	\$	\$		\$
	\$	\$		\$
	\$	\$		\$
Enter total amount of loans owed to committee here:	\$	\$		\$

Line item Y1

Line item Y2

Line item Y3

SUMMARY OF INCOME AND EXPENDITURES

Balance o	\$5676.36		
		Credit	Debit
		Credit	Debit
	Candidate's Personal Contribution to Own Campaign	\$.	
Income:			
***************************************	Unitemized Contributions	\$.	
	Itemized Contributions	\$.	
***************************************	Contributions from Candidate Committees	\$.	
	Contributions from Organizations	\$.	
	Contributions from Political Parties	s .	
	Contributions from In-State PACs	\$.	
	Contributions from Out-of-State or Federal PACs	s .	
	In Kind Contributions	\$.	
	Other Income	\$.	
	Expenditures from an external source to establish a committee	\$.	
Expenditures			
	Operational Expenditures		\$ 585 38
	Contributions to Candidates and Committees		\$5090.98
	Debts and Obligations Owed by the Committee		\$.
Loan Activity			
	Monetary loan made to Candidate or Committee during reporting period	\$.	
	Monetary loan made to Candidate or Committee repaid during reporting period		\$.
	Monetary loan made by Committee during reporting period		\$.
	Monetary loan repaid to Committee during the reporting period	\$.	
Am	nount on hand at the end of the reporting period:	\$. 0

County, municipal and school candidates file with the person in charge of the local election.

^{*}Note: You cannot end the reporting period with a negative balance.